

|  |                  |  |          |  |         |             |
|--|------------------|--|----------|--|---------|-------------|
| No. <b>C 156459</b>  |                  | <b>Due no later than Sep 30, 2016</b>  |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>                 |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>CITICORP NORTH AMERICA, INC.<br>LAUREL HARVEY<br>P.O. BOX 30509<br>ATTN: TAX & REPORTING<br>TAMPA FL 33631 |          | C T CORPORATION SYSTEM<br>921 S ORCHARD ST STE G<br>BOISE ID 83705 |         |             |
|  |                  |  |          | 3. <u>New</u> Registered Agent Signature:*                         |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                  |  |          |  |         |             |
| Office Held  | Name             | Street or PO Address   | City     | State  | Country | Postal Code |
| DIRECTOR   | CAROL SHERIDAN   | 227 WEST MONROE ST   | CHICAGO  | IL   | USA     | 60606       |
| PRESIDENT  | PETER MOZER      | 388 GREENWICH STREET   | NEW YORK | NY   | USA     | 10013       |
| SECRETARY  | JOSEPH B WOLLARD | 153 E 53RD STREET  | NEW YORK | NY   | USA     | 10022       |
| DIRECTOR   | PETER W O'CONNOR | 390 GREENWICH STREET   | NEW YORK | NY   | USA     | 10013       |
| TREASURER  | VICTOR SPADAFORA | 388 GREENWICH STREET   | NEW YORK | NY   | USA     | 10013       |
| DIRECTOR   | JOSEPH TREDICI   | 111 WALL STREET  | NEW YORK | NY   | USA     | 10005       |
| DIRECTOR   | PETER MOZER      | 388 GREENWICH STREET   | NEW YORK | NY   | USA     | 10013       |
| DIRECTOR   | EVELYN HAVASI    | 390 GREENWICH STREET   | NEW YORK | NY   | USA     | 10013       |
| 5. Organized Under the Laws of:<br><br><b>DE<br/>C 156459</b>  |                  | 6. Annual Report must be signed.*<br>Signature: JULIE SCHMIDT<br>Name (type or print): JULIE SCHMIDT<br>Date: 07/29/2016<br>Title: ASSISTANT TAX OFFICER   |          |  |         |             |
| Processed 07/29/2016   |                  | * Electronically provided signatures are accepted as original signatures.  |          |  |         |             |